



920476-904881

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of : S D Brueckheimer
Serial No. : 09/751,060
Filed : December 29, 2000
For : Network Planning Tool
Examiner : D R Vincent
Art Unit : 2661
Customer number : 23644

RECEIVED

JUN 25 2004

Technology Center 2600

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450," on June 14, 2004
Name of person signing Jennifer J. Ramirez
Signature _____

RESPONSE TO RESTRICTION REQUIREMENT MAILED MAY 12TH 2004

Honorable Director of Patents and Trademarks
PO Box 1450
Alexandria VA 22313-1450

Dear Sir,

In response to the requirement for restriction mailed May 12 2004, the applicants remark as follows:

06/21/2004 HDENESS1 00000001 09751060

01 FC:1203 290.00 OP

08/06/2004 BLAWSON 00000001 120913 09751060

01 FC:1202 234.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09751060

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	26 minus 20 =	-6
INDEPENDENT CLAIMS	4 minus 3 =	-1
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X\$ 9=		OR	X\$18=	108
X40=		OR	X80=	80
+135=		OR	+270=	
TOTAL		OR	TOTAL	898.00

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
6/17/04			
Total	39	Minus	** 26 = 13
Independent	3	Minus	*** 4 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input checked="" type="checkbox"/>			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	234.00
X40=		OR	X80=	0
+135=		OR	+270=	290.00
TOTAL		OR	TOTAL	524.00

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	** =
Independent		Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	** =
Independent		Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.